

10520042

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)						SERIAL NO.	FILING DATE						
						10520042							
						APPLICANT(S)							
CLAIMS													
	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT			AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
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2		/				52							
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TOTAL IND.	/					TOTAL IND.							
TOTAL DEP.	/	◀		◀	◀	TOTAL DEP.	◀		◀	◀	◀		
TOTAL CLAIMS	2	████████		████████	████████	TOTAL CLAIMS	████████		████████	████████	████████		